

APPLICATION DATA SHEET**Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

CD-ROM or CD-R?:: None

Number of CD Disks:: 0

Number of Copies of CDs:: 0

Sequence Submission?:: No

Computer Readable Form (CRF)?:: No

Number of Copies of CRF:: 0

Title:: SELECTIVE PLACEMENT OF DISLOCATION
ARRAYS

Attorney Docket Number:: ASC-061

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure:: 4

Total Drawing Sheets:: 12

Small Entity?:: No

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: U.S.A.

Status:: Full Capacity

Given Name:: Anthony

Middle Name:: J.

Family Name:: Lochtefeld

Name Suffix::
City of Residence:: Somerville
State or Province of Residence:: MA
Country of Residence:: U.S.A.
Street of Mailing Address:: 73 Garrison Avenue
City of Mailing Address:: Somerville
State or Province of Mailing Address:: MA
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 02144

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.A.
Status:: Full Capacity
Given Name:: Christopher
Middle Name:: W.
Family Name:: Leitz
Name Suffix::
City of Residence:: Nashua
State or Province of Residence:: NH
Country of Residence:: U.S.A.
Street of Mailing Address:: 1 Clocktower Place, Apt. 225
City of Mailing Address:: Nashua
State or Province of Mailing Address:: NH
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 03060

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.A.
Status:: Full Capacity
Given Name:: Matthew
Middle Name:: T.
Family Name:: Currie
Name Suffix::

City of Residence:: Windham
State or Province of Residence:: NH
Country of Residence:: U.S.A.
Street of Mailing Address:: 8 Fletcher Road
City of Mailing Address:: Windham
State or Province of Mailing Address:: NH
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 03087

Applicant Authority Type:: Inventor
Primary Citizenship Country:: U.S.A.
Status:: Full Capacity
Given Name:: Mayank
Middle Name::
Family Name:: Bulsara
Name Suffix::
City of Residence:: Cambridge
State or Province of Residence:: MA
Country of Residence:: U.S.A.
Street of Mailing Address:: 62 Spring Street, Apartment 2L
City of Mailing Address:: Cambridge
State or Province of Mailing Address:: MA
Country of Mailing Address:: U.S.A.
Postal or Zip Code of Mailing Address:: 02141

Correspondence Information

Correspondence Customer Number:: 021323

Representative Information

Representative Customer Number:: 021323

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-Provisional	60/399,171	July 29, 2002
This application	Non-Provisional	60/452,516	March 6, 2003

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
		MM/DD/YY	

Assignee Information

Assignee Name:: AmberWave Systems Corporation

City of Mailing Address:: Salem

State or Province of Mailing Address:: NH

Country of Mailing Address:: U.S.A.